DATENT ADDITION SEE DETERMINATION DECOME									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 995539													1
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN		
TOTAL CLAIMS			1 11	111				RATE FEE		FEE	1	RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FEE 355.0		355.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			[][m	[] minus 20=		91		X\$ 9= & (8)		<u>නු</u> ම -	OR	X\$18=	
_	DEPENDENT (<u> </u>	G minus 3 =		3		X40= 120			OR	X80=		
Ľ	ULTIPLE DEPE	NDENT CLAIM	Present	resent 				+135=			OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2									1	294	OR	TOTAL	
1	Franct						OTHER						
4	2-28-04	(Column 1)		(Colum				SMALL	_		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BEA	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	1.111	Minus	·· //	1	- P		X\$*9≅	上		OR	X\$18=	1
M	Independent	FATTATION OF A	Minus		0	= 4		X40=	T		OR	X80=	$< \neg$
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	\boldsymbol{x}			+270€	
											+27U= TOTAL		
		(Column 1) (Column 2) (Column 3)							ĒL		OR ,	DOIT. FEE	
AMENOMENT B	1 7 1 3 1 4	CLAIMS		HIGH	EST	ST				(DDI-	r		ADDI-
	144 p. 4	AFTER AMENDMENT	100	PREVIO PAID F		USLY EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE
	Total	<u> </u>	Minus	. 11	\perp	• —		X\$ 9=			OR	X\$18=	
	Independent FIRST PRESE	ENTATION OF M	Minus ULTIPLE DE	PENDENT	CLAIM			X40=			OR	X80=	
							1	+135=			OR	+270=	
							L A	TOTAL			OR A	TOTAL DOIT, FEE	
		(Column 1)		(Colum		(Column 3)					•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	TK	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=			OR	X\$18=	
3	Independent	•	Minus			=		X40=	T			X80=	
	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							╂	, 	DR -		
* If the entry in column 4 is from than the maturity column 0 water 1977 in column 0												+270=	
	the "Highest Nu	mber Previously Parties of the Previously Pa	aid For IN THI	S SPACE is I	less than	20. enter "20."	A	TOTAL DOTT. FEE			OR A	TOTAL DDIT. FEE	
•	The Highest Num	iber Previously Pa	id For (Total o	r Independen	ti) is the I	righest number	r loun	d in the ap	pprop	riate box i	n colu	mn 1.	
													1